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ROBERT J. HENKE, STAFF DIRECTOR

United States Senate

COMMITTEE ON VETERANS' AFFAIRS WASHINGTON, DC 20510

February 8, 2019

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The Honorable Robert Wilkie Secretary of Veterans Affairs 810 Vermont Avenue, North West Washington, DC 20420

Secretary Wilkie,

I applaud efforts by the Department of Veterans Affairs (VA) to more effectively address the tragic number of veteran suicides. And while I agree that it is vitally important to celebrate successes in suicide prevention and mental health wellness, I believe it is premature for the Department to proclaim significant progress on this issue. Moving forward, I encourage VA to continue working collaboratively with other federal, state and local stakeholders on the Governor's Challenge and other initiatives, and request that the Creating Options for Veterans' Expedited Recovery (COVER) Commission come to Montana to get a first-hand perspective of the daunting mental health challenges in frontier areas.

Rural and frontier states continue to struggle with very high rates of veteran suicide. In Montana, the suicide rate has remained essentially the same since 2014 – more than 45 veterans per 100,000. Additionally, the average number of veterans who die by suicide every day is 20, another figure that has remained constant since 2014. Even worse are the trends in suicide rates for veterans aged 18-34, which have skyrocketed from 35.5 suicides per 100,000 veterans in 2014 to 45 suicides per 100,000 veterans in 2016. It is shocking to see the precipitous rise in suicides among our younger veterans, and more work must be done to reach this vulnerable population.

I encourage VA to continue funding successful programs, and to bolster its suicide prevention efforts, especially those directed at younger and rural veterans. I applaud the work of the Veterans Crisis Line in helping millions veterans in times of distress. And I want to highlight the importance of the public health approach employed by the Mayor's and Governor's Challenges. The State of Montana and the communities of Helena and Billings are eager participants in those initiatives. These and similar evidence-based VA-operated programs should be given the focus and resources they need to thrive and produce needed results.

But the challenges are daunting. Rural and frontier veterans often lack access to some of the complementary and integrative health (CIH) services that countless veterans across the country have credited for their recovery. These veterans often live many miles away from the nearest medical facility, whether VA-operated or otherwise, and many lack broadband access to effectively utilize VA's pioneering telehealth programs. The COVER Commission, tasked with examining and assessing the availability of evidence-based mental health and CIH therapies, has thus far visited only urban and suburban VA facilities considered to be leaders in the field of

mental health treatment. In order to get a better appreciation for the full range of VA services, I invite the Commission to visit facilities in Montana and meet with local veterans and advocates who navigate these barriers on a daily basis. A first-hand understanding of these challenges would be indispensable to the Commission's task of evaluating the full range of mental health and CIH services VA has to offer.

Veterans across the country—urban, rural, and frontier—continue to struggle with mental health issues that VA, non-profits, and individuals are working tirelessly to address. Given the amount of work to be done, I am hopeful these efforts can be carried out with the utmost urgency and in the most collaborative manner possible. And I look forward to working closely with you on behalf of our nation's veterans.

Sincerely,

Jon Tester

Ranking Member